

STATE OF MISSOURI
MISSOURI DEPARTMENT OF NATURAL RESOURCES
GEOLOGICAL SURVEY PROGRAM

FORM OGC-3

APPLICATION FOR PERMIT TO DRILL, DEEPEN OR PLUG BACK

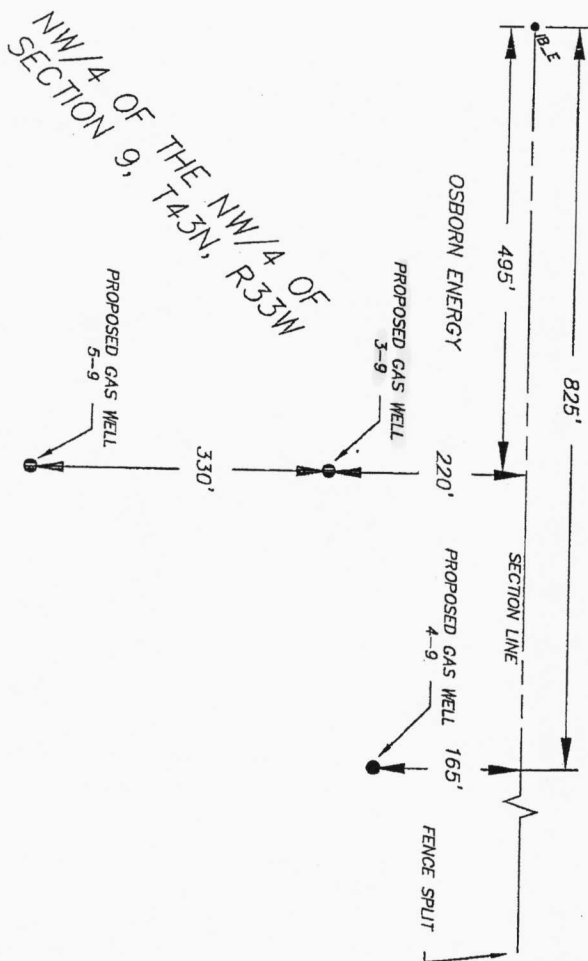
<input checked="" type="checkbox"/> APPLICATION TO DRILL		<input type="checkbox"/> DEEPEN	<input type="checkbox"/> PLUG BACK	<input checked="" type="checkbox"/> FOR AN OIL WELL		<input type="checkbox"/> OR GAS WELL	
NAME OF COMPANY OR OPERATOR OSBORN ENERGY, LLC						DATE 5/18/2006	
ADDRESS 24850 FARLEY			CITY BUCYRUS		STATE KS	ZIP CODE 66013	
DESCRIPTION OF WELL AND LEASE							
NAME OF LEASE OSBORN			WELL NUMBER 3-9		ELEVATION (GROUND) 940		
WELL LOCATION (GIVE FOOTAGE FROM SECTION LINES) 220 ft. from <input checked="" type="checkbox"/> North <input type="checkbox"/> South section line 495 ft. from <input type="checkbox"/> East <input checked="" type="checkbox"/> West section line							
WELL LOCATION Sec. 9 Township 43 North Range 33 <input type="checkbox"/> East <input checked="" type="checkbox"/> West			LATITUDE _____		LONGITUDE _____		COUNTY CASS
NEAREST DISTANCE FROM PROPOSED LOCATION TO PROPERTY OR LEASE LINE 220 FEET							
DISTANCE FROM PROPOSED LOCATION TO NEAREST DRILLING, COMPLETED OR APPLIED - FOR WELL ON THE SAME LEASE 165 FEET							
PROPOSED DEPTH 600'	DRILLING CONTRACTOR, NAME AND ADDRESS OSBORN ENERGY, LLC BUCYRUS, KS			ROTARY OR CABLE TOOLS	APPROX. DATE WORK WILL START		
NUMBER OF ACRES IN LEASE 4000	NUMBER OF WELLS ON LEASE INCLUDING THIS WELL, COMPLETED IN OR DRILLING TO THIS RESERVOIR 3						
NUMBER OF ABANDONED WELLS ON LEASE none							
IF LEASE PURCHASED WITH ONE OR MORE WELLS DRILLED, FROM WHOM PURCHASED? NAME _____ ADDRESS _____				NO. OF WELLS PRODUCING _____ INJECTION _____ INACTIVE _____ ABANDONED _____			
STATUS OF BOND		<input type="checkbox"/> SINGLE WELL AMOUNT \$ _____		<input checked="" type="checkbox"/> BLANKET BOND AMOUNT \$ 30000.00		<input checked="" type="checkbox"/> ON FILE <input type="checkbox"/> ATTACHED	
REMARKS: (IF THIS IS AN APPLICATION TO DEEPEN OR PLUG BACK, BRIEFLY DESCRIBE WORK TO BE DONE, GIVING PRESENT PRODUCING/INJECTION ZONE AND EXPECTED NEW INJECTION ZONE; USE BACK OF FORM IF NEEDED)							
PROPOSED CASING PROGRAM				APPROVED CASING - TO BE FILLED IN BY STATE GEOLOGIST			
AMOUNT	SIZE	WT/FT	CEMENT	AMOUNT	SIZE	WT/FT	CEMENT
20'	8"		Portland	20'	8"		Port to surface
600'	4 1/2"		Portland	600'	4 1/2"		Port to surface
I, the Undersigned, state that I am the geologist of the Osborn Energy, LLC (Company), and that I am authorized by said company to make this report, and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct, and complete to the best of my knowledge.							
SIGNATURE <i>Meredith L. Pean</i>						DATE May 19, 2006	
PERMIT NUMBER 2 0760				<input checked="" type="checkbox"/> DRILLER'S LOG REQUIRED <input type="checkbox"/> CORE ANALYSIS REQUIRED IF RUN <input type="checkbox"/> SAMPLES REQUIRED <input checked="" type="checkbox"/> SAMPLES NOT REQUIRED <input type="checkbox"/> WATER SAMPLES REQUIRED AT			
APPROVED DATE 6-15-06				<input checked="" type="checkbox"/> E-LOGS REQUIRED IF RUN <input checked="" type="checkbox"/> DRILL SYSTEM TEST INFO REQUIRED IF RUN			
APPROVED BY <i>Meredith L. Pean</i>							
NOTE ► THIS PERMIT NOT TRANSFERABLE TO ANY OTHER PERSON OR TO ANY OTHER LOCATION.							
APPROVAL OF THIS PERMIT BY THE OIL AND GAS COUNCIL DOES NOT CONSTITUTE ENDORSEMENT OF THE GEOLOGIC MERITS OF THE PROPOSED WELL NOR ENDORSEMENT OF THE QUALIFICATIONS OF THE PERMITTEE							
I, Meredith of the _____ (Company), confirm that an approved drilling permit has been obtained by the owner of this well. Council approval of this permit will be shown on this form by presence of a permit number and signature of authorized council representative.							
DRILLER'S SIGNATURE <i>Meredith L. Pean</i>						DATE May 19, 2006	

AUTOCAD VERBOS INFORMATION BLOCK	
DRAWING: 301329.1-SY-06-4-008.DWG	DATE: 05/20/06
REF: DWG1	REF: DWG2
REF: DWG3	REF: DWG4

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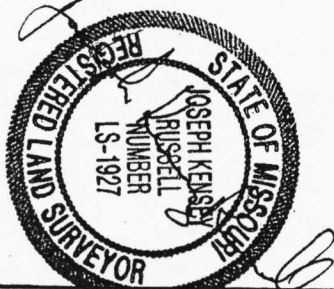
MAY 22 2006

Mo Oil & Gas Council



LEGEND:

- B.L.F. - IRON BAR W/ALUM CAP EXISTING
- - PROPOSED GAS WELL



This is to certify that to the best of my knowledge and belief this map accurately represents the results of a survey performed on 05/12/2006.

BY: *Joseph Kensey Russell* DATE: 5-16-06

Original Signature in a color other than black.

1. THIS IS NOT A BOUNDARY SURVEY. IT IS FOR PROPOSED GAS WELL LOCATION.
2. GROUND ELEVATIONS AT WELL LOCATIONS INTERPOLATED FROM USGS FREEMAN, MO-KANS. QUADRANGLE MAP NGVD 1929

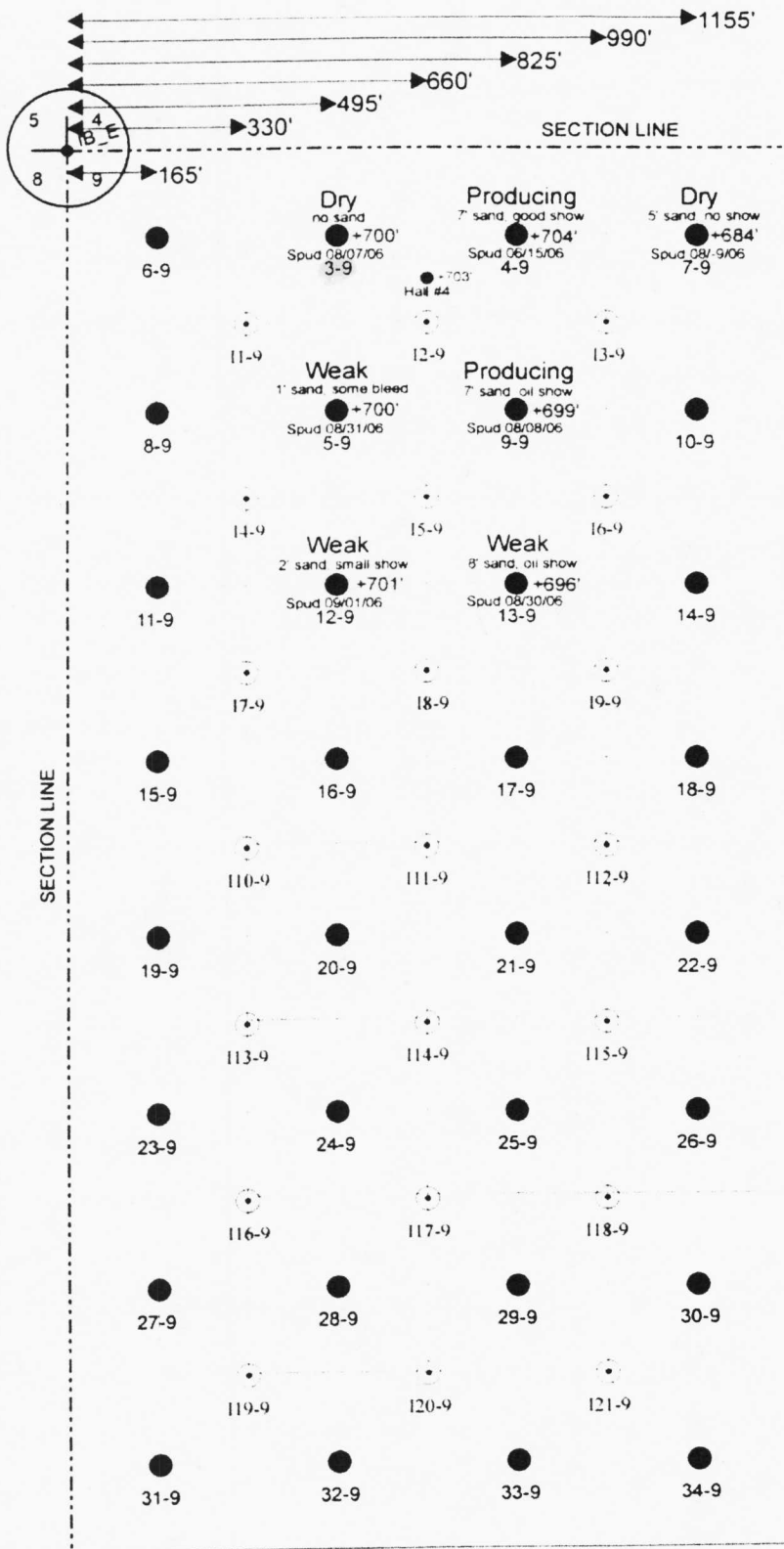
SHEET NO. 1	OSBORN ENERGY GAS WELL LOCATION OSBORN-NW/4 SEC. 9 SITE CASS COUNTY, MISSOURI	SHAFFER, KLINE & WARREN, INC. 521 Jackson Street, Chillicothe, MO 64601 660/646-9788 Fax: 660/646-9791 OTHER OFFICE LOCATIONS: Iowa, KS DeWitt, PA, KS Macon, MO Kansas City, MO Oak, MO Clinton, MO Winfield, MO Lawrence, KS New Haven, MO USGS FREEMAN	Designed By: _____	5			
			Drawn By: TAT	4			
			Checked By: KES	3			
			Issue Date: 05/20/06	2			
			Job No. 301329	1			
			NO. DATE	REVISIONS	BY	APP'D	
			COPYRIGHT © 2002-SHAFFER, KLINE & WARREN, INC.				

Cass 037-20766

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SEP 26 2006

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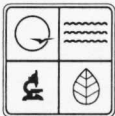
W/2 OF THE NW/4 OF SECTION 9, T43N, R33W

- IB_E IRON BAR W/ALUM CAP EXISTING
- PROPOSED OIL WELL
- PROPOSED INJECTION WELL



Osborn Energy, LLC

24850 FARLEY STREET
BUCYRUS, KS 66013
ph (913) 533-9900
fax (913) 533-9955



STATE OF MISSOURI
MISSOURI DEPARTMENT OF NATURAL RESOURCES
GEOLOGICAL SURVEY PROGRAM

FORM OGC-5

WELL COMPLETION OR RECOMPLETION REPORT AND WELL LOG

☒ NEW WELL ☐ WORKOVER ☐ DEEPEN ☐ PLUG BACK ☐ INJECTION ☐ SAME RESERVOIR ☐ DIFFERENT RESERVOIR ☐ OIL ☐ GAS ☒ DRY

OWNER OSBORN ENERGY, LLC		ADDRESS 24850 FARLEY	
LEASE NAME OSBORN		WELL NUMBER 3-9	
LOCATION OF WELL Sec. <u>9</u> Twp <u>43</u> North, Rng <u>33</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West OR <u>165</u> ft. from <input checked="" type="checkbox"/> North <input type="checkbox"/> South <u>495</u> ft. from <input type="checkbox"/> East <input checked="" type="checkbox"/> West	SEC TWN RNG OR BLOCK AND SURVEY	LATITUDE	LONGITUDE
COUNTY CASS	PERMIT NUMBER (OGC-3 OR OGC-31) 20760		
DATE SPUDDED 8/7/2006	DATE TOTAL DEPTH REACHED 8/7/2006	DATE COMPLETED READY TO PRODUCE OR INJECT N/A	ELEVATION (DF, RKR, RT, OR Gr.) FEET 840'
TOTAL DEPTH 300'		ELEVATION OF CASING HD. FLANGE FEET	
PRODUCING OR INJECTION INTERVAL(S) FOR THIS COMPLETION DRY		ROTARY TOOLS USED (INTERVAL) 0 TO 300	CABLE TOOLS USED (INTERVAL)
WAS THIS WELL DIRECTIONALLY DRILLED? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		WAS DIRECTIONAL SURVEY MADE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	DATE FILED
TYPE OF ELECTRICAL OR OTHER LOGS RUN (JUST LOGS FILED WITH THE STATE GEOLOGIST)		WAS COPY OF DIRECTIONAL SURVEY FILED? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	DATE FILED

CASING RECORD

CASING (REPORT ALL STRINGS SET IN WELL – CONDUCTOR, SURFACE, INTERMEDIATE, PRODUCING, ETC.)

PURPOSE	SIZE HOLE DRILLED	SIZE CASING SET	WEIGHT (LB. FT)	DEPTH SET	SACKS CEMENT	AMOUNT PULLED
NONE						

TUBING RECORD

LINER RECORD

SIZE	DEPTH SET	PACKER SET AT	SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN
INCH	FEET	FEET	INCH	FEET	FEET		FEET

PERFORATION RECORD

ACID, SHOT, FRACTURE, CEMENT SQUEEZE RECORD

NUMBER PER FEET	SIZE AND TYPE	DEPTH INTERVAL	AMOUNT AND KIND OF MATERIAL USED	DEPTH INTERVAL

INITIAL PRODUCTION

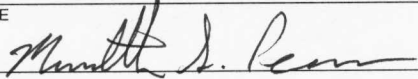
DATE OF FIRST PRODUCTION OR INJECTION		PRODUCING METHOD (INDICATE IF FLOWING, GAS LIFT, OR PUMPING – IF PUMPING, SHOW SIZE AND TYPE OF PUMP.) N/A				
DATE OF TEST	HOURS TESTED	CHOKE SIZE	OIL PRODUCED DURING TEST BBLS	GAS PRODUCED DURING TEST MCF	WATER PRODUCED DURING TEST BBLS	OIL GRAVITY API (CORR.)
TUBING PRESSURE	CASING PRESSURE	CALCULATED RATE OF PRODUCTION PER 24 HOURS		OIL BBLS	GAS MCF	WATER BBLS

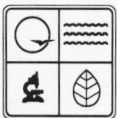
DISPOSITION OF GAS (STATE WHETHER VENTED, USED FOR FUEL OR SOLD)

METHOD OF DISPOSAL OF MUD PIT CONTENTS

LET WATER EVAPORATE THEN USE BULLDOZER TO BACKFILL PIT

CERTIFICATE: I, the Undersigned, state that I am the GEOLOGIST of the OELLC (Company), and that I am authorized by said company to make this report, and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct and complete to the best of my knowledge.

DATE Nov 14, 2006	SIGNATURE 
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STATE OF MISSOURI
MISSOURI DEPARTMENT OF NATURAL RESOURCES
GEOLOGICAL SURVEY PROGRAM
PLUGGING RECORD

FORM OGC-7

OWNER'S NAME OSBORN ENERGY, LLC		ADDRESS 24850 FARLEY STREET BUCYRUS, KS 66013	
NAME OF LEASE OSBORN		WELL NUMBER 3-9	PERMIT NUMBER (OGC-3 OR OGC-31 NUMBER) 20760
LOCATION OF WELL SEC TWN RNG OR BLOCK AND SURVEY Sec. 9 Township 43 North Range 33 <input type="checkbox"/> East <input checked="" type="checkbox"/> West		LATITUDE	LONGITUDE
		COUNTY CASS	
APPLICATION TO DRILL THIS WELL WAS FILED IN NAME OF: OSBORN ENERGY, LLC		CHARACTER OF WELL AT COMPLETION (INITIAL PRODUCTION) OIL (BBLS/DAY) GAS (MCF/DAY)	
DATE OF ABANDONMENT 8/11/2006		TOTAL DEPTH 300'	
AMOUNT WELL PRODUCING PRIOR TO ABANDONMENT OIL (BBLS/DAY) GAS (MCF/DAY)		WATER (BBLS/DAY)	

Name of each formation containing oil or gas. Indicate which formation open to well bore at time of abandonment	Fluid content of each formation	Depth interval of each formation	Size, kind, and depth of plugs used, giving amount of cement.
NONE			CEMENTED 58SX, TOP TO BOTTOM

SIZE PIPE	PUT IN WELL (FT)	PULLED OUT (FT)	LEFT IN WELL (FT)	GIVE DEPTH AND METHOD OF PARTING CASING (SHOT, RIPPED, ETC.)	PACKERS AND SHOES
1"	300'	300'	0	N/A	

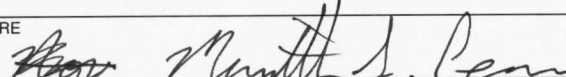
WAS WELL FILLED WITH MUD-LADEN FLUID? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	INDICATE DEEPEST FORMATION CONTAINING FRESH WATER N/A
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NAME AND ADDRESSES OF ADJACENT LEASE OPERATORS OR OWNERS OF THE SURFACE		
NAME	ADDRESS	DIRECTION FROM THIS WELL

METHOD OF DISPOSAL OF MUD PIT CONTENTS	LET WATER EVAPORATE AND USE BULLDOZER TO BACKFILL PIT
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NOTE	FILE THIS FORM IN DUPLICATE WITH: (USE REVERSE SIDE FOR ADDITIONAL DETAIL)
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CERTIFICATE I, the undersigned, state that I am the GEOLOGIST of the OELLC (Company), and that I am authorized by said company to make this report; and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct and complete to the best of my knowledge.

SIGNATURE 	DATE Mar 14, 2006
--	-----------------------------

Glaze Drilling Company

22139 S. Victory Rd.
 Spring Hill K.S. 66081
 Phone : (913) 592-2033
 Fax : (913) 592-2448
 glazedrilling@aol.com

SEP 25 2006

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CUSTOMER OSBORN ENERGY
 LEASE NAME OSBORN (MO.)
 WELL NUMBER 3-9
 SPUD DATE 8/7/06
 SURFACE SIZE _____ HOLE SIZE _____

WELL LOG

18	broken rock	18	
10	lime	28	
4	Shale	32	
21	lime	53	
5	Shale	58	
1	Blk Shale	59	some water
2	lime	61	
3	Shale	64	
7	lime	71	Hertha
116	Shale	187	(smell of oil) 187-188
11	Shale	198	
2	Blk Shale	200	
28	Shale	228	
2	lime	230	
64	Shale	294	
6	lime	300	T.D. 300



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SEP 25 2006

REMIT TO
Consolidated Oil Well Services, Inc.
Dept. 1228
Denver, CO 80256

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
FAX 620/431-0012

INVOICE Mo Oil & Gas Council

Invoice # 208136

Invoice Date: 08/17/2006 Terms: 0/30,n/30

Page 1

OSBORN ENERGY LLC
24850 FARLEY
BUCYRUS KS 66013
(913)533-9900

OSBORN 3-9
9-43-33W
8791
08/11/06
MO

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	58.00	8.8500	513.30
1118B	PREMIUM GEL / BENTONITE	100.00	.1400	14.00

	Description	Hours	Unit Price	Total
237	TON MILEAGE DELIVERY	1.00	189.00	189.00
290	P & A NEW WELL	1.00	800.00	800.00
290	EQUIPMENT MILEAGE (ONE WAY)	.00	3.15	.00
369	80 BBL VACUUM TRUCK (CEMENT)	2.50	90.00	225.00

OE

Parts:	527.30	Freight:	.00	Tax:	35.85	AR	1777.15
Labor:	.00	Misc:	.00	Total:	1777.15		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____

Date _____

BARTLESVILLE, OK
P.O. Box 1453 74005
918/338-0808

EUREKA, Ks
820 E. 7th 67045
620/583-7664

OTTAWA, Ks
2631 So. Eisenhower Ave. 66067
785/242-4044

GILLETTE, WY
300 Enterprise Avenue 82716
307/686-4914

THAYER, Ks
8655 Dorn Road 66776
620/839-5269

WELL REPORT		Date:	8/11/04	Job #:	
Well Owner:		IPGF: mss DPT	Well #:	3-9	
Osborne		Contractor: O. E			
Location of well serviced:		Job Started:	11:00	Job Completed:	1:00
A.P.E.#:	Authorized By:	Tubing Condition:			
Description of Services rendered:		Joints of Feet of Tubing:			
Rod Condition:		Tubing Anchor:			
Number of Rods:		Kind of Rods:			
DESCRIPTION:	Length/Hours	Unit Cost	Clay/OBC Inventory	Acct. Code	OE Inventory
1 Pulling unit	2	100			
		TOTALS:			
		0	0	0	0
Remarks					
Run to 12 joints of 1" in a uncased hole, consolidated Cemented, pulled out 12 joints of 1" clean up pipe.					
Equipment changed:					
Signed by:		Title:	Signed by:	Title:	
Loft Brown					

Remarks

Remarks
Run in 12 joints of 1" in a uncased hole, Consolidated
Cemented, pulled out 12 joints of 1" clamp up pipe.

Equipment changed:

Signed by:

Title:

Signed by:

Title: